

**Area 1, West Texas
HMAZ—El Paso County**

Subpopulation: FMS Female White

Ranking: 14

Name of Intervention	15-month follow-up of women Methadone patients
Risk Behavior(s)	Poor barrier use with multiple partners. Using drugs during sex
Influencing Factor(s) or FIBs	Problem hierarchy Social Status Peer pressure Social norms Self-esteem Self-efficacy Substance use Fatalism Social Policy Access
Intended Immediate Outcomes	Increased condom use with their partners
Type	Group-Level Intervention
Setting	Methadone maintenance clinics
Is this intervention currently being provided in your planning area?	No
Rationale for Selecting this Intervention:	Women who participated in the intervention significantly increase frequency of condom use with their partners. Offers opportunity to practice skills

**Area 1, West Texas
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Subpopulation: FMS Female White

Ranking: 14

Name of Intervention	AIDS and the transmission of Illicit Drug injection
Risk Behavior(s)	Poor barrier use with multiple partners. Using drugs during sex.
Influencing Factor(s) or FIBs	Problem hierarchy Social Status Peer pressure Social norms Self-esteem Self-efficacy Substance use Fatalism Social Policy Access
Intended Immediate Outcomes	Prevent the transition from sniffing heroin to injecting heroin
Type	Group-Level Intervention
Setting	Community storefront
Is this intervention currently being provided in your planning area?	No
Rationale for Selecting this Intervention:	Based on the social learning principles Men and women who participated in the intervention were significantly less likely to inject drugs than those in the comparison condition.

**Area 1, West Texas
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Name of Intervention	AIDS Demonstration Project
Risk Behavior(s)	Moderate to poor barrier use for oral and vaginal sex, 67% never used barriers for anal sex.
Influencing Factor(s) or FIBs	<p>Self efficacy Intentions Expected outcomes Perceived susceptibility Cultural group norms Peer pressure Social support Environmental facilitators (access to condoms)</p> <p>Adaptation must address: Problem hierarchy Social Status Self-esteem Peer Pressure Relationship dynamics Follow-up</p>
Intended Immediate Outcomes	To increase condom use with main and non-main partners And to increase disinfection of injecting equipment
Type	Community-Level Intervention
Setting	Street setting, public sex environments, other community venues
Is this intervention currently being provided in your planning area?	No
Rationale for Selecting this Intervention:	<p>Based on proven theories: Social Learning theory and the Transtheoretical Model (Stages of Change)</p> <p>Offers opportunity to practice relevant skills, repeated community contacts</p> <p>Intervention has been shown to be effective with members of the IDU population.</p>

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Name of Intervention	Reducing HIV Needle Risk Behaviors
Risk Behavior(s)	Poor barrier use with multiple partners. Using drugs during sex.
Influencing Factor(s) or FIBs	Problem hierarchy Social Status Peer pressure Social norms Self-esteem Self-efficacy Substance use Fatalism Social Policy Access
Intended Immediate Outcomes	Increase the number and portion of IDU who exhibit safer injecting habits. Increase understanding of behaviors that make them susceptible to HIV Increase understanding of the severity of HIV Identification of barriers and learn risk reduction methods to overcome those barriers Identify and learn methods to overcome relationship issues related to safer injection practices
Type	Group-Level Intervention
Setting	Community, educational setting
Is this intervention currently being provided in your planning area?	No
Rationale for Selecting this Intervention:	Based on the Health Belief Model And the AIDS Risk Reduction Model can also be applied Provides the opportunity to practice relevant skills Intervention has been shown to be effective with member of the IDU population.

**Area 1, West Texas
HMAZ—El Paso County**

Subpopulation: FMS Female White

Ranking: 14

Name of Intervention	Condom Skills Education and Sexuality Transmitted Disease Reinfection
Risk Behavior(s)	Moderate to poor barrier use for oral and vaginal sex, 67% never used barriers for anal sex.
Influencing Factor(s) or FIBs	Problem hierarchy Social Status Self-esteem Self-efficacy Social norms Peer Pressure Relationship dynamics Social support Follow-up
Intended Immediate Outcomes	This intervention is based on the premise that familiarity with condoms and skills in using condoms properly are necessary for increasing future condom use.
Type	Group-Level Intervention
Setting	Waiting room of an STD clinic
Is this intervention currently being provided in your planning area?	No
Rationale for Selecting this Intervention:	Men and women who participated in the intervention were significantly less likely to return to the STD clinic within the next 12 months with a new STD than those in the comparison condition. Offers opportunity to practice relevant skills.

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Subpopulation: FMS Female White

Ranking: 14

Name of Intervention	Effects of HIV/AIDS Intervention Groups for High-Risk Women in Urban Clinics
Risk Behavior(s)	Moderate to poor barrier use for oral and vaginal sex, 67% never used barriers for anal sex.
Influencing Factor(s) or FIBs	Problem hierarchy Social Status Self-esteem Self-efficacy Social norms Peer Pressure Relationship dynamics Social support Follow-up
Intended Immediate Outcomes	Increase condom use with partners and a significant decrease in their frequency of engaging in unprotected sex.
Type	Group-Level Intervention
Setting	Inner-city health clinic
Is this intervention currently being provided in your planning area?	No
Rationale for Selecting this Intervention:	Women who participated in the intervention reported a significant greater increase in condom use with their partners and a significant greater decrease in their frequency of engaging in unprotected sex than women in the comparison group. Offers opportunity to practice relevant skills.

**Area 1, West Texas
HMAZ—El Paso County**

Subpopulation: FMS Female White

Ranking: 14

Name of Intervention	Project Respect: Efficacy of Risk Reduction Counseling to Prevent HIV and STDs
Risk Behavior(s)	Moderate to poor barrier use for oral and vaginal sex, 67% never used barriers for anal sex.
Influencing Factor(s) or FIBs	<p>Attitudes Group norms Intentions Self-efficacy Expected outcomes Perceived susceptibility</p> <p>Adaptation must address: Problem hierarchy Social Status Self-esteem Peer Pressure Relationship dynamics Social support Follow-up</p>
Intended Immediate Outcomes	To reduce high risk behaviors and prevent new STDs
Type	Group-Level Intervention
Setting	STD clinics
Is this intervention currently being provided in your planning area?	No
Rationale for Selecting this Intervention:	<p>Based on the Theory of Reasoned Action And Social Learning Theory</p> <p>Sessions are interactive and deigned to change factors that could facilitate condom use.</p> <p>Offers opportunity to practice relevant skills.</p>

**Area 1, West Texas
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Subpopulation: FMS Female White

Ranking: 14

Name of Intervention	Comprehensive Human Sexuality Curriculum
Risk Behavior(s)	Moderate to poor barrier use for oral and vaginal sex, 67% never used barriers for anal sex.
Influencing Factor(s) or FIBs	<p>Self-esteem Self-efficacy Relationship development Social networks Social position Social policy Cultural norms Perceived susceptibility Perceived severity Stereotypical beliefs Fatalism Social inequalities Access Attitudes and intentions</p> <p>Adaptation must address: Problem hierarchy Peer Pressure Relationship dynamics Social support Follow-up</p>
Intended Immediate Outcomes	To increase condom use with sexual partners during vaginal and anal sex
Type	Group-Level Intervention
Setting	Community-based organizations/Community Centers
Is this intervention currently being provided in your planning area?	Yes
Rationale for Selecting this Intervention:	<p>Based on the Health Belief Model, Transtheoretical Model, and The Theory of Reasoned Action</p> <p>Offers opportunity to practice relevant skills</p> <p>Intervention was designed for the El Paso community by using data collected through client feedback and community needs assessments.</p>

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Tab 7 – Intervention Selection Form

Subpopulation: ALL SUBPOPULATIONS

Ranking: FMS-White-Women-14

Name of Intervention	Prevention Counseling/Partner Elicitation (PCPE)
Risk Behavior(s)	Substance use Sex without condoms Multiple partners
Influencing Factor(s) or FIBs	Perceived susceptibility Environmental facilitators (access to condoms and testing) Knowledge of STDs Group or Cultural Norms
Intended Immediate Outcomes	Increase proportion of HIV -infected persons who know their status Increase condom use Improve communication and negotiation skills Improve self perception of risk Provide access to condoms and testing Improve knowledge of STDs Reduce Number of sex partners
Type	Individual Level Intervention
Setting	Community based organization, STD clinics, other community-based locations
Currently provided?	Yes
Rationale for selecting intervention:	<p>Counseling, testing, referral and partner services have been recommended as an effective intervention for all populations in Texas. In the Centers for Disease Control and Prevention's <i>HIV Prevention Strategic Plan Through 2005</i>, Goal 2 is to increase the proportion of HIV-infected people in the U.S. who know they are infected through voluntary counseling and testing. The CDC's objectives to meeting this goal support the inclusion of this intervention for all populations. These objectives include: improving access to voluntary, client-centered counseling and testing in high seroprevalance populations and increasing the number of providers who provide voluntary, client-centered counseling and testing. The core elements of this intervention include risk assessment, risk reduction plan, and the option to test for HIV either anonymously or confidentially.</p> <p>The Texas CPGs recommend the following strategies to promote PCPE: 1) Fact Sheet p. 31. <i>Culturally Tailored HIV/AIDS Risk-Reduction Messages Targeted to African-American Urban Women</i>. This 20-minute video increased the likelihood that women would view HIV as a personal risk, to request condoms, to talk with friends about AIDS, and to get tested for HIV.</p>

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	<p>2) Fact Sheet p. 34 <i>Context Framing to Enhance HIV Antibody Testing Messages Targeted to African-American Women</i>. This 25-minute video emphasizes the personal losses from not testing. Women were more likely to get tested and to talk to partners about testing after this video.</p> <p>3) Single session HIV/AIDS informational education: basic informational sessions discussing risks, correct condom and bleach kit use, referrals and the like enhance participants willingness to test either during or after the session.</p> <p>4) Bar outreach: sustained, consistent presence in a bar type setting enhances testing. The specific outreach that is known to work consisted of weekly presence in the bar, with an informational table, with staff present and interacting with bar managers, performers and patrons for 2-4 hours at a time. Testing was conducted at the bar or referral made to a community-based organization. Staff gained the trust of all through their sustained efforts.</p> <p style="text-align: right;">pcpe</p>
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Tab 7 – Intervention Selection Form

Subpopulation: All **high priority** subpopulations, consistent with CDC
Guidance, September 1997

Ranking: FMS-White-Women-14

Name of Intervention	Prevention Case Management (PCM)
Risk Behavior(s)	Multiple high risk behaviors consistent with HIV Prevention Case Management Guidance, September 1997 by the CDC Substance use Sex without condoms Multiple partners
Influencing Factor(s) or FIBs	Perceived susceptibility Fatalism Self Efficacy Peer Pressure Cultural group norms
Intended Immediate Outcomes	Increase condom use Decrease number of partners Increase Self Esteem Referral for new HIV positives into Early Intervention Programs Referral of HIV positives into more intensive Intervention Programs that address the Factors Influencing the Risky Behavior.
Type	Individual Level Intervention
Setting	Community based organization, STD clinics, other locations
Currently provided?	No
Rationale for selecting intervention:	<i>This intervention should target only high-risk individuals, whether HIV-positive or HIV-negative, with multiple, complex problems and risk-reduction needs.</i> This intensive, client-centered prevention activity has the fundamental goal of promoting the adoption and maintenance of HIV risk-reduction behaviors. It is suitable for individuals seeking stability and regularity in their lives and/or individuals who are reaching an action step in dealing with health concerns. PCM should include 1) client recruitment and engagement, 2) screening and assessment of HIV and STD risks and medical and psychosocial service needs, 3) development of a client-centered prevention plan, 4) multiple session HIV risk-reduction counseling, 5) active coordination of services with follow-up, 6) monitoring and reassessment of client's needs, risks, and progress, and 7) discharge from PCM services upon attainment and maintenance of risk-reduction goals. <div style="text-align: right;">pcm</div>

**Area 1, West Texas
HMAZ—El Paso County**

Subpopulation: FMS Females living with HIV/AIDS Ranking: Medium

Name of Intervention	Prevention for HIV Infected Persons Project (PHIPP)
Risk Behavior(s)	Partners at-risk for HIV infection, very high substance use, partners have multiple partners, use of alcohol, some history of STD infection.
Influencing Factor(s) or FIBs	<p>Relationship Development Relationship dynamics Social position Self-efficacy/communication skills Social networks Social support Social group norms Expected outcomes Perceived susceptibility Perceived severity Perceived benefits Perceived barriers with the intention to overcome them Unknown serostatus Access Follow-up/Referral STD testing and treatment (surrogate markers – co-factors of the transmission of HIV)</p> <p>25% reported having at least one STD in the past. 75% reported substance use. 33.3% reported that their partners were at-risk for HIV infection, and 100% reported that their partners had multiple partners. 75% reported cocaine use. 25% reported the use of marijuana. 50% reported the use of alcohol.</p>
Intended Immediate Outcomes	Reduce the frequency of unprotected anal/oral/vaginal intercourse
Type	Group-Level Intervention
Setting	Community setting with access to medical and social services
Is this intervention currently being provided in your planning area?	No
Rationale for Selecting this Intervention:	<p>Based on the Health belief model, and The Social Learning Theory</p> <p>Offers opportunity to interact with other persons living with HIV/AIDS. Offers opportunity to practice relevant skills.</p>